Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

Α	Fort	the 2011 calen	dar year, or tax yea	r beginning	, 2011, and endi	ng		,	
В	Check	if applicable	С				D Employer Ide	entification	ı Number
		ddress change	Concerned Ne	eighbors Against			27-380	3704	
	\Box	lame change	Illegal Bill	lboards			E Telephone ni	umber	
	177	nitial return	2350 Kerner	Blvd., Suite 250			(415)	389-6	5800
	H,	erminated	San Rafael,	CA 94901		<u> </u>	(120)		
POSTMARK	H',						G 0		233,287
S,	╁┤.	mended return	E Name and address of	of assessed officers - December -			G Gross receipt group return for		177
3	∄ ⊔′	application pending	ì			1	ffiliates included		
3:	<u> </u>		` 	vd., Suite 250 San Rafae			ttach a list (see		ıs) Yes L
FS		-exempt status	501(c)(3) X 50	01(c) (4) ◀ (insert no.)	4947(a)(1) or 527	<u> </u>			
Z)	™ We	ebsite: ► N/	<u>'A</u>			H(c) Group ex	xemption number	<u>r</u> ►	
r <u>K</u>		m of organization	Corporation Ti	rust Association Other ►	L Year of Forma	ation 2010	M State	of legal do	micile CA
P	art I	Summar							
G	1	Briefly descri	be the organization	's mission or most significant	activities To educa	ite_and	inform_t	the c	ommunity_
⊶ ø				<u>l to the regulation</u>					
Activities & Governance		Californ							
Ę,		33233							
3	2	Check this bo	ox ► If the ora	anization discontinued its oper	ations or disposed of m	ore than 25	% of its net	assets	
ΡĞ	3			ne governing body (Part VI, lin			3		
စ္	4	Number of in	idependent voting m	nembers of the governing body	(Part VI, line 1b)		4		
ij	5	Total number	r of individuals emp	loyed in calendar year 2011 (F	Part V, line 2a)		. 5		
훒	6	Total number	r of volunteers (esti	mate if necessary)			6		
ď	7 a	Total unrelate	ed business revenu	e from Part VIII, column (C), I	ne 12		7	а	0
	t	Net unrelated	d business taxable i	ncome from Form 990-T, line	34		7	b	0
						Pr	ior Year	C	Current Year
•	8	Contributions	s and grants (Part V	(III, line 1h)		<u> </u>			233,287
Revenue	9	Program serv	vice revenue (Part \	/III, line 2g)		<u> </u>			
š	10			olumn (A), lines 3, 4, and 7d)		, L			
æ	11	Other revenu	ie (Part VIII, column	n (A), lines 5, 6d, 8c, 9c, 10c,	章 で で で で で で で で り で り り り り り り り り り				
	12			ough 11 (must equal Part VIII <mark>,</mark>	column (A), line 12)				233,287
	13	Grants and s	imilar amounts paid	d (Part IX, column (A) կրբs 1-	3)	61			
	14	Benefits paid	to or for members	(Part IX, column (A), ine 4)	AUG 1 3 2012 19	21			
	15	Salaries, oth	er compensation, er	mployee benefits (Par 🗓 coli	umn (A), lines 5-10) (g				
963	162	Professional	fundraising fees (P.	art IX, column (A), line 11e)	ODEAL LIT	-)			
Expenses		. T. I. I. C I	randraising rees (art ix, column (), mid i to,	JUDEN, UT	7			
ន្ត	"			t IX, column (D), line 25		- }			
_	17			n (A), lines 11a-11d, 11f-24e)		ļ		_	237,778
	18	Total expens	es. Add lines 13-17	(must equal Part IX, column	(A), line 25)				237,778
	19	Revenue less	s expenses Subtrac	ct line 18 from line 12					-4,491
58						Beginning	of Current Yea	ar E	End of Year
Not Assets Fund Balan	20	Total assets	(Part X, line 16)			L	11,750		C
A A	21	Total liabilitie	es (Part X, line 26)				0		C
ş	22	Net assets or	r fund balances Su	btract line 21 from line 20			11,750	.1	C
P	art II	Signatur							
				and this return, including accompanying s	chadular and statements, and to	a the best of m	, knowledge and	haliaf it is	true correct and
cor	nplete	Declaration of prep	arer (other than officer) is	ed this return, including accompanying s based on all information of which prepa	rer has any knowledge	o the best of my	Knowledge and	Delier, it is	ade, correct, and
			——————————————————————————————————————	p 2-			8.7.	201	
Si	gn	Signatu	are of officer			Date	,		
He		Jas	on D. Kaune			Asst	Secretar	v	
			r print name and title			11550	<u> </u>	<u> </u>	
		Print/Type r	preparer's name	Preparer's signature	Date	1,	Charle III	PTIN	
_	٠	· ····································		· _ ·			Check if		
	id			Self-Prepared	<u> </u>	<u> </u>	self-employed		
	epar	alse i					_		
US	e Oı	TIY Firm's addr	ess				Firm's EIN	1 .	
							Phone no		
Ma	y the	IRS discuss th	ns return with the p	reparer shown above? (see in	structions)				Yes No
RΛ	A Fo	r Panenyork F	Reduction Act Notic	e see the senarate instruction	ns TE	FA01131 08/1	8/11		Form 990 (201

Part	990 (2011) Concerned Neighbors Against	27-38	30370		F	
	Statement of Program Service Accomplishments					
	Check if Schedule O contains a response to any question in this Part III					
1 1	Briefly describe the organization's mission					
	To educate and inform the community about issues related to the	remilat	tion	of		
-	billboards on the municipal level in California			_ _ -		
-						
2 !	Did the organization undertake any significant program services during the year which were not listed or	n the prioi	r			
1	Form 990 or 990-EZ?		. П	Yes	X	No
	If 'Yes,' describe these new services on Schedule O		_		_	
	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices?		Yes	X	No
		AICE2.	Ш	163	L.	110
	If 'Yes,' describe these changes on Schedule O.					
4 !	Describe the organization's program service accomplishments for each of its three largest program serv Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the ar	ices, as n	neasure	d by e	expens	es.
·	others, the total expenses, and revenue, if any, for each program service reported.	nount or ç	grants a	nu an	ocalio	15 10
,	culois, the total experience, and revenue, in any, the season program control reported.					
	(Code:) (Expenses \$ 186,467. including grants of \$) (F)
_	Advocacy concerning proposed measure in West Hollywood that would	<u>l have</u>	rest	rict	ed_	
	billboards					
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4b	(Code:) (Expenses \$) (F	Revenue	\$)
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Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Х Schedule A Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates X for public office? If 'Yes,' complete Schedule C, Part I 3 Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule Did in the contraction of the distribution or investment of amounts in such funds or accounts? 6 X Part I Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 Х Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete 9 Х Schedule D. Part IV 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 10 X If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10° If 'Yes,' complete Schedule X D. Part VI 11 a **b** Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If 'Yes,' complete Schedule D, Part VII* Х 11 b c Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII Х 11 c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part IX 11 d Х Х e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11 e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X 11 f Х 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D. Parts XI, XII, and XIII 12a Х b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 12b Х Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a Х **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? *If 'Yes,' complete Schedule F, Parts I and IV* 14b X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV 15 Х 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) Х 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18 Х Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III Х 19 Х 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

20 b

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		_X_
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		<u>X</u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		<u> X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		Х
BAA		Form	990	(2011)

The Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable be Enter the number of Forms W-26 included in line 1a. Enter -0- if not applicable continued in the number of Forms W-26 included in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not applicable continued in line 1a. Enter -0- if not septimized in line 1a. Enter -0- if	1 41	Cheek of Cabadula Cheeks and a recessor to any question in this Rest V				
1a Enter the number reported in Box 3 of Form 1996. Enter 0-th not applicable 1b 0 0 b Enter the number of Forms W-2G included in line 1a. Enter 0-th not applicable 1b 0 0 C pld the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize warners? 2a Enter the number of employees reported on Form W-3. Transmittal of Vlage and Tas State ments, filed for the calendar year entiring with or withholding rules for reportable payments to vendors and reportable gaming (gambling) without the payment with the payment of the payment with the payment that returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to entire the sum of their 2a, did the organization file all required tederal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to entire the sum of the foreign country? She if Yes's has it filed a Form 990-T for this year? If Wo, provide an explanation in Schedule 0 At at any time during the calendary ear, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country? See instructions for filing requirements for Form TD F 90-221, Report of Foreign Bank and Financial Accounts Sa Was the organization and the organization that it was or is a party to a prohibited tax sheller transaction? If Yes, i did the organization the form 8884-7 B) If Yes, if the sa or 5b, did the organization the Form 8885-7 Organizations that may receive deductible on thibitions under section 170(c). So the organization have annual gross receipts that are normally greater than \$100,000, and did the organization she is payed. If Yes, i on the organization in excess of \$75 made party as a contribution and partly for goods and extress provided to the payer. Organizations that may receive deductible contributions under section 170(c). If Yes, i and the organization excess you fund, firstley for indirectly, to pay premi		Check if Schedule O contains a response to any question in this Part V			Vaa	
b Enter the number of Forms W-20 included in line 1a. Enter -0 if not applicable 1b 0	1.	Enter the south a second of the Day 2 of Form 1006. Enter 0, if not continue to	ا ما		162	NO
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax State remerts, field off the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? All bit with the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) 3 a Dot the organization have unrelated business gross income of \$1,000 or more during the year? 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a bit if Yes' she is if lied a Form 990-T for this year? If No. 'provide an explanation in Schedule O 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a bit if Yes' is referred in the rame of the foregron country. See enstructions for filing requirements for Form 17 or 90.22.1, Report of Foreign Bank and Financial Accounts 3 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any orthributions that were not tax deductible? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any orthributions that were not tax deductible? 7 bit if Yes, if one San 55, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 8 bit Yes, indicate that number of Forms 88282 filed during the year or the property for which it was required to file Form 88957. 9 bit if Yes, indicate the number of Forms 88282 filed during the year or the property of the organizat		·				
(gambling) winnings to prize winners? 2 a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return bit at least one is reported on ine 2a, dit the organization file all required federal employment tax returns? Note. If the sum of lines I a and 2a is greater than 250, you may be required to e-file. (see instructions) 3 bit file vast one interested business organization of 15,000 or more during the year? 3 bit file's has it filed a Form 990 T for this year? If No., provide an explanation in Schedule O 4 A At any time during the calendar year, did the reganization have an interest in, or a signature or other authority over, a file of the companies of the reganization of the provided of the reganization of the very solicitation an express statement that such contributions or gifts were not tax deductible? 5 a D reganization of the receive a payment in excess of \$75 made partly as a contribution of did the organization receive a payment in excess of \$75 made partly as a contribution of programation of the value of the goods or services provided? 5 b If Yes, if do the organization network of forms 8328 Life during the year of the reganization of the reganization received a contribution of undertely, to pay premiums on a personal benefit contract?			_ · · · · · · · · · · · · · · · · · · ·			
28 Eiter the number of employees reported on Form W.3. Transmittal of Wape and Tax State tents. It is to the calcular year ending with or within the year covered by this return. b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a greater than 290, you may be required to e-file. (see instructions) 3 b Id the organization have unrelated business gross income of \$1,000 or more during the year? 3 b If Yes has if filed a Form 990-T for this year? If No. 'provide an explanation in Schedule 0 4 at any time during the calendar year, did the organization have an interest in or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts in 1 Yes, 'enter the name of the foreign country: " See instructions for filing requirements for Form TD F 90-221, Report of Foreign Bank and Financial Accounts 54 Was the organization at sheller transaction at any time during the tax year? 5 b Was the organization and organization file Form 886-T? 5 b Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7 b If Yes,' do the organization notify the donor of the value of the goods or services provided? 8 b If Yes,' do the organization notify the donor of the value of the goods or services provided? 9 b If Yes,' do the organization notify the donor of the value of the goods or services provided? 10 b the organization secure any funds, directly or indirectly, to pay premiums on a personal benefit contract? 11 b If Yes,' do the organization notify the donor of the value of the goods or services provided? 12 c D the donormation from the service of the service	С	Did the organization comply with backup withholding rules for reportable payments to vendo (gambling) winnings to prize winners?	rs and reportable gaming	1 c		
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14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	136			
	c	Enter the amount of reserves on hand	13c			
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 a	Did the organization receive any payments for indoor tanning services during the tax year?	ļ	14a		<u> </u>
	b	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O	14b		<u></u>

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for

	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char	iges ii	n	
	Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI			X
Sec	ction A. Governing Body and Management		-	11
			Yes	No
	a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
	b Enter the number of voting members included in line 1a, above, who are independent	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		X
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets See Sch O	5	Х	
6	Did the organization have members or stockholders?	6		X
7	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		<u>x</u>
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	a The governing body?	8a		X
	b Each committee with authority to act on behalf of the governing body?	8ь		X
	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9	-	Х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Na
10	a Did the exemptation have lead chapters, branches, or affiliates?	10a	Yes	No X
	a Did the organization have local chapters, branches, or affiliates?	104		
	b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b	Х	
	 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 	118	Λ	
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a		Х
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	a The organization's CEO, Executive Director, or top management official	15a		X
	b Other officers of key employees of the organization	15 b		Х
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х
	b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
	ction C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed - CA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request	ıvaılabl	le for	public
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available the public during the tax year See Schedule O	lable to		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the org	janizat	iou.	

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors; institutional trustees, officers, key employees, highest compensated employees, and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (C) Position (B) **(F)** (A) (do not check more than one box, unless person is both an officer and a director/trustee) (E) Estimated amount of other compensation Average hours per week (describe Name and title Reportable compensation from Reportable compensation from the organization (W 2/1099-MISC) related organizations (W-2/1099-MISC) Former Individual or director Officer Highest compensated employee from the institutional trustee hours for related organization and related employee organizaorganizations tions in Schedule O) trustee (1) Ryan Brooks Secretary/CFO 1 X X 0 0. 0. (2) John Duong President/Chair 1 Х X 0. 0. 0. (3) Jason D. Kaune Asst Secretary 1 X 0 0 0. (5) (6) **(7**) _(9)_ (10) (11) (12) (13) (14)

Section A. Officers, Directors, Trust	ees, r	<u>\ey</u>	Em			es,	and	nignest Com	ipensated Em	ployees (cont)
,		1		•	C)					
(A)	(B) Average	(do	not c	POS heck	more	than	one h an	(D) Reportable	(E)	(F) Estimated
Name and title	hours	offic	er an				tee)	compensation from	Reportable compensation from related organizations	amount of other
	week (describ e hours for related organi- zations	or d	inst	Officer	κ ey	를 를	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	organization
	e hours	vidua	tutio	cer	emp	nest o	пer			and related organizations
	related	la si	nal tr		Key employee	duo				
	zations	stee	Institutional trustee			Highest compensated employee				
	Sch O)					l e				
<u>(15)</u>										
(16)										
(17)						· -				
(18)						<u> </u>				
(19)										
(29)										
(21)										
(22)										
(23)				_						
(24)										
(25)										
1 b Sub-total								0.	0	. 0.
c Total from continuation sheets to Part VII, Section	Α						•	0.	0	
d Total (add lines 1b and 1c)							>	0.	0	. 0.
2 Total number of individuals (including but not limited	d to the	ose I	istec	d ab	ove)) wh	o re	ceived more than	\$100,000 of repo	table compensation
from the organization 0								-		Vac No
3 Did the organization list any former officer, director	or truc	too	kov		برمام	00	or b	ighast compansat	ad amplayes	Yes No
on line 1a? If 'Yes,' complete Schedule J for such ii	ndıvıdu	al	кеу	em	ыоу	ee, i	JI 111	ignest compensati	eu employee	3 X
4 For any individual listed on line 1a, is the sum of re	portabl	е со	mpe	nsa	tion	and	oth	er compensation	from	
the organization and related organizations greater the such individual	han \$1	50,0	007	If 'Y	'es'	com	plet	e Schedule J for		4 X
5 Did any person listed on line 1a receive or accrue or	ompen	satio	n fro	om a	anv	unre	elate	ed organization or	ındıvıdual	SATE OF LABOR
for services rendered to the organization? If 'Yes,' or	omple	te So	ched	ule	J fo	r suc	ch p	erson	·	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensat	ed inde	nen	dent	cor	ntrac	tors	tha	it received more t	han \$100,000 of	
compensation from the organization. Report compe	nsation	for	the	cale	nda	r yea	ar e	nding with or with	in the organization	n's tax year.
Name and business address	s							Description (B)	of services	(C) Compensation
									- 	
	-									
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		llim	ited	to th	nose	list	ed a	above) who receiv	ed more than	ASI- TANES

exempt business excluded from t function revenue under sections	Pai	t VIII Statement of Revenue		, – – – – – – – – – – – – – – – – – – –	,	,
b Membership dues Fundraising events d Related organizations d Related organizations 1 d e Bovernmett grisis (contributions) 1 d 1 d 2 d 6 wormmett grisis (contributions) 1 f 1 d 2 33, 287. 8 b Action activations included above 1 f 2 33, 287. 9 f Notal contributions related in its la-if \$ 2 a 1 f All other program service revenue 2 f National Add lines 2a-2f 4 income from investment of tax-exempt bond proceeds 5 Royaltes 6 a Gross rents b Less rental expenses c Rental income or (loss) 4 d Net gain or (loss) 6 A Gross amount from sales of a sest of the fluid income or (loss) 4 Net gain or (loss) 8 a Gross amount from sales of a sest of other hair membry b Less cont or other hairs and sales expenses c Rent income or (loss) 9 a Gross income from fundraising events (not including \$ fund undraising events) (not including \$ fund undraising events) (not including \$ fund undraising events) (not including \$ fund undraising events) 9 a Gross income from form fundraising events (not including \$ fund undraising events) 9 a Gross income from gaming activities See Part IV, line 18 b Less direct expenses c Net income or (loss) from gaming activities b Less cost of goods sold c Net income or (loss) from gaming activities b Less cost of goods sold c Net income or (loss) from gaming activities b Less cost of goods sold c Net income or (loss) from sales of inventory Meditaneous Revenue 6 usulness Code				exempt function		(D) Revenue excluded from tax under sections 512, 513, or 514
b Membership dues d Related organizations d Related organizations 1 c d Related organizations 1 d d Related organization	S. (5	1a Federated campaigns 1a				
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11a			<u> </u>			
b		Miscellaneous Revenue Business Code				
b		11a	ļ			
		l l				
d All other revenue .						
e Total. Add lines 11a-11d		e Total. Add lines 11a-11d	·			
12 Total revenue. See instructions > 233, 287. 0. 0.		12 Total revenue. See instructions	233,287.	0.	0.	0.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a r	esponse to any question	ı ın this Part IX	-	
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management				
Ŀ	Legal	88,534.	44,267.	44,267.	
c	: Accounting				
c	Lobbying				
e	Professional fundraising services. See Part IV, line 17			-	
f	Investment management fees				
c	Other	7,044.		7,044.	
12	Advertising and promotion	1,624.	1,624.	·	
13	Office expenses				
14	Information technology	1,343.	1,343.		
15	Royalties.		·		
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,659.	1,659.		
20	Interest				
21	Payments to affiliates	<u> </u>			
22	Depreciation, depletion, and amortization				
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Printing and Publications	54,388.	54,388.		
	Consulting	44,201.	44,201.		
	Polling & Research	19,500.	19,500.		
	Postage and Shipping	18,279.	18,279.		_
	All other expenses	1,206.	1,206.		-
	Total functional expenses. Add lines 1 through 24e.	237,778.	186,467.	51,311.	0.
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here If following	,		,	
	SOP 98-2 (ASC 958-720)				

Part X Balance Sheet (A) Beginning of year (B) End of year 11,750 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 10b 10 c **b** Less: accumulated depreciation 11 11 Investments - publicly traded securities. 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 11,750 16 0. 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D. 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 22 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 0 0 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here and complete lines 27 through 29 and lines 33 and 34. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 29 Permanently restricted net assets R Organizations that do not follow SFAS 117, check here lines 30 through 34. 30 Capital stock or trust principal, or current funds 11.750 30 Paid-in or capital surplus, or land, building, or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds 11,750 0. 33 33 Total net assets or fund balances 11,750 34 0. 34 Total liabilities and net assets/fund balances

BAA Form 990 (2011)

Form 990 (2011) Concerned Neighbors Against	27-3803704	Page	12
Reconciliation of Net Assets			_
Check if Schedule O contains a response to any question in this Part XI			X
	1 1		
1 Total revenue (must equal Part VIII, column (A), line 12)	1	233, 287	
2 Total expenses (must equal Part IX, column (A), line 25)	2	237,778	
3 Revenue less expenses Subtract line 2 from line 1	3	-4,491	
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	11,750	
5 Other changes in net assets or fund balances (explain in Schedule O) See Schedule (5 5		<u>9.</u>
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, lin column (B))	e 33,	(0.
Financial Statements and Reporting			
Check if Schedule O contains a response to any question in this Part XII			
1 Accounting method used to prepare the Form 990 X Cash Accrual Other _		Yes N	0
If the organization changed its method of accounting from a prior year or checked 'Other,' exin Schedule O	plain		
2a Were the organization's financial statements compiled or reviewed by an independent account	tant?	2a X	
b Were the organization's financial statements audited by an independent accountant?		2b >	<u>X</u>
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility review, or compilation of its financial statements and selection of an independent accountant	for oversight of the audit,	2c	
If the organization changed either its oversight process or selection process during the tax ye in Schedule O.	ar, explaın		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for th separate basis, consolidated basis, or both	e year were issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as Audit Act and OMB Circular A-133?	set forth in the Single	3a >	<u>X_</u>
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not or audits, explain why in Schedule O and describe any steps taken to undergo such audits	undergo the required audit	3b	
BAA		Form 990 (201	11)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2011

Department of the Treasury Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• ;	section 501(c)(4), (5), or (6) o	rganizations Complete Part III.			
Name	of organization			Employer identification	
Cor	ncerned Neighbors A			27-380370	
	Complete if the or	rganization is exempt under secti	on 501(c) or is a	section 527 organia	zation.
1	Provide a description of the	organization's direct and indirect political of	campaign activities in	Part IV.	
2	Political expenditures			▶\$	
3	Volunteer hours				
	Complete if the or	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any exc	ise tax incurred by the organization under	section 4955	►\$	
2	Enter the amount of any exc	ise tax incurred by organization managers	under section 4955	▶\$	
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4 a	Was a correction made?				Yes No
b	If 'Yes,' describe in Part IV.				
	Complete if the or	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3).	
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	n activities > \$	
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ► \$	
3	Total exempt function expen line 17b	ditures Add lines 1 and 2. Enter here and	on Form 1120-POL,	► \$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes X No
5	organization made payments	and employer identification number (EIN) s. For each organization listed, enter the a ons received that were promptly and direc il action committee (PAC). If additional spa	mount paid from the t	iling organization's fund	ds. Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 20				27-3803	
Part II-A Complete if section 501		n is exempt under se	ction 501(c)(3) a	ind filed Form 5768 (ele	ection under
A Check ► If the file	ing organization belo	ongs to an affiliated group	(and list in Part IV e	each affiliated group member	's name,
address	, EIN, expenses, an	d share of excess lobbying	expenditures).		
B Check ► If the file	ing organization che	cked box A and 'limited co	ntrol' provisions app	oly.	
(The term		ring Expenditures ons amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	tures to influence pu	iblic opinion (grass roots lo	obbying).		
b Total lobbying expendit	tures to influence a	legislative body (direct lobl	oying).		
c Total lobbying expendit	tures (add lines 1a a	and 1b)			
d Other exempt purpose	expenditures				
e Total exempt purpose e	expenditures (add lii	nes 1c and 1d)			
f Lobbying nontaxable ar both columns.	mount. Enter the am	nount from the following tal	ble ın		
If the amount on line 1e, col	lumn (a) or (b) is	The lobbying nontaxable a	mount is		
Not over \$500,000	(*,***	20% of the amount on line 1e		Ì	
Over \$500,000 but not over \$1	1.000.000	\$100,000 plus 15% of the excess	over \$500,000.		
Over \$1,000,000 but not over \$	· · · · · · · · · · · · · · · · · · ·	\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$	··· · · · · · · · · · · · · · · · · ·	\$225,000 plus 5% of the excess	· · · · · · · · · · · · · · · · · · ·		
Over \$17,000,000	4.7 /1000/000	\$1,000,000			
g Grassroots nontaxable	amount (enter 25%	· · · · · · · · · · · · · · · · · · ·			· · · — — — — — — — — — — — — — — —
h Subtract line 1g from lii					
i Subtract line 1f from lin					
		ther line 1h or line 1i, did t	he organization file	Form 4720 reporting	
section 4911 tax for this					Yes No
(Som	ne organizations tha	4-Year Averaging Period L It made a section 501(h) el Is below. See the instruction	ection do not have	to complete all of the five	
	Lobb	ying Expenditures During	4-Year Averaging F	Period	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					000 000 570 0001
BAA				Schedule C (Form	990 or 990-EZ) 2011

5	(a)	(b)
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		الأدمية عادية الادارة - -
a Volunteers?			.a
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			و. <u>است</u> ان در در در در در در در در در در در در در
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5)	, or	
section 501(c)(6).			
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1 X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2 X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	1/->/E\		3 X
Complete if the organization is exempt under section 501(c)(4), section 50501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' (answered 'Yes.'	1(c)(5) OR (b)	, or s Part	3 X ection
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No'	1(c)(5) OR (b)	, or s Part	3 X ection
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' (answered 'Yes.'	OR (b)	Part	3 X ection
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' (answered 'Yes.' 1 Dues, assessments and similar amounts from members. 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political)	OR (b)	Part	3 X ection
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' (answered 'Yes.' 1 Dues, assessments and similar amounts from members. 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	OR (b)	Part	3 X ection
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Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' (answered 'Yes.' 1 Dues, assessments and similar amounts from members. 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year	OR (b)	Part 1 2a 2b	3 X ection
Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' (answered 'Yes.' 1 Dues, assessments and similar amounts from members. 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	OR (b)	Part 1 2a 2b 2c	3 X ection
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Schedule C (Form 990 or 990-EZ) 2011 Concerned Neighbors Against	27-3803704	Page 4
Supplemental Information (continued)		
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SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

2011

OMB No 1545-0047

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

Department of the Treasury Internal Revenue Service

(4) (5) (6) (7) (8) (9) (10)

Total

Name of the organization Concerned Neighbors Against

Illegal Billboards

Employer identification number 27-3803704

(c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 Yes No (1)(2) (3) (4) (5) (6) 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ► Ś ▶\$ 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (b) Loan to or from the organization? (c) Original principal amount (g) Written agreement? (d) Balance due (f) Approved by board or committee? (a) Name of interested person and purpose (e) In default? From Yes No Yes No Yes No (1) (2) (3)

▶\$ **Grants or Assistance Benefiting Interested Persons.**

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance	
1)			
2)			
(3)			
(4)			
(5)			
(6)			
Ø			
(8)			
(9)			
10)		·-	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule **L** (Form 990 or 990-EZ) 2011

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	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing
	organization	uansacion		revenues Yes N
(1) See Part V	Business	88,534.	Legal Services	2
(2)				_
(3)	_			
(4)				
(6)				
7)				
(8)				
(10)				
Supplemental Information				
Complete this part to provide addition	ial information for responses	to questions on Schedul	e L (see instructions).	
Supplemental Information				
Jason_Kaune, Assistant_Sec	retary, is a part	ner_with_the_la	w firm that provides	s_legal
services to the organizati	on and hills the	organization on	an hourly basis Le	eral fee
Services_to_the_organizati	on and bills the	01941112401011_011	_dir_nodriy_busisik	2941 100
_ paid to the law firm are i	ncluded in Part I	X, Line 11b.		
				
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

2011

Department of the Treasury Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization Concerned Neighbors Against	Employer identification number
Illegal Billboards	27-3803704
Form 990, Part VI, Line 5 - Description of Material Diversion of Assets	
The Organization retained a professional services firm, Durkee	and Associates, to
maintain its bank account. The firm and its principal is await	ing sentencing for
embezzling funds from clients, including the Organization. Acc	cording to an
independent analysis, Durkee and Associates inappropriately di	verted \$7,759 in funds
from the Organization. The Organization does not expect to re-	coup_any_of_these
funds. This filing represents the actual balance of funds.	-
Form 990, Part VI, Line 11b - Form 990 Review Process	-
A copy of Form 990 is provided to Officers prior to filng	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
No documents available to the public.	
	-

2011

Schedule O - Supplemental Information Concerned Neighbors Against Illegal Billboards

Page 2

27-3803704

Form 990, Part XI, Line 5 Other Changes in Net Assets or Fund Balances

See Schedule O

Total \$

	Federal Worksheets Concerned Neighbors Against Illegal Billboards				
Form 990, Part IX, Line 24e Other Expenses					
		(A) otal	(B) Program Services	(C) Management <u>& General</u>	(D) <u>Fundraising</u>
Campaign Paraphenalia	Total \$	1,206. 1,206. \$			